

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name United Building Maintenance, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 36-3925503

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

11244 Chesapeake
Westchester, IL 60154

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Cook

County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **United Building Maintenance, Inc.**
Name

Case number (if known)

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing? Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☒ No.
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **United Building Maintenance, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☒ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☒ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Debtor **United Building Maintenance, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **July 12, 2018**
MM / DD / YYYY

X /s/ James Cabrera, Sr.

Signature of authorized representative of debtor

James Cabrera, Sr.

Printed name

Title **President**

18. Signature of attorney

X /s/ Ariel Weissberg

Signature of attorney for debtor

Date **July 12, 2018**

MM / DD / YYYY

Ariel Weissberg 03125591

Printed name

Weissberg and Associates, Ltd.

Firm name

401 S. LaSalle St.

Suite 403

Chicago, IL 60605

Number, Street, City, State & ZIP Code

Contact phone **312-663-0004**

Email address **ariel@weissberglaw.com**

03125591 IL

Bar number and State

Fill in this information to identify the case:

Debtor name United Building Maintenance, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 12, 2018

X /s/ James Cabrera, Sr.

Signature of individual signing on behalf of debtor

James Cabrera, Sr.

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name United Building Maintenance, Inc.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	First Midwest Bank <small>Creditor's Name</small> c/o Jeffrey Elegant, Much Shelist 191 North Wacker Drive, Suite 1800 Chicago, IL 60606 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Blanket Lien on Substantially all of Debtor's Assets Describe the lien Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,000,000.00 Unknown

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$2,000,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **United Building Maintenance, Inc.**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF ILLINOIS**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 165 Easy Street LLC 165 Easy Street Carol Stream, IL 60188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$9,750.00
3.2	Nonpriority creditor's name and mailing address 360 Facility LLC/Accruent Company PO Box 123636 Dept. 3636 Dallas, TX 75312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,980.00
3.3	Nonpriority creditor's name and mailing address A-1 Airport Limousine Service 114 East Lake Street Bloomington, IL 60108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$865.31
3.4	Nonpriority creditor's name and mailing address Acme WCS 14 Congress Circle West Roselle, IL 60172 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$19,959.95

Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.5	Nonpriority creditor's name and mailing address Adams Delaware Owner LLC 4960 Solution Center Chicago, IL 60677 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,950.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address Ally P.O. Box 380902 Minneapolis, MN 55428-0902 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$599.84 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address American Express Box 0001 Los Angeles, CA 90096-8000 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$38,414.26 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address AmeriSource 1600 E. Grand Blvd. Detroit, MI 48211 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$261,562.93 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address Angelina Arroyo 4444 W. Altgeld St. Chicago, IL 60639 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address Antonia Rivera 4206 Fern Ave. Lyons, IL 60534 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.11	Nonpriority creditor's name and mailing address Aramark Uniform Services 4200 S. Halsted Suite 603 Chicago, IL 60609 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,311.47 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.12	Nonpriority creditor's name and mailing address Aspen Valley Landscape/AmEx 13148 W 159th Street Homer Glen, IL 60491 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$286.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address AT&T P.O. Box 5093 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$972.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Telephone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address AT&T Mobility PO Box 6416 Carol Stream, IL 60197-6416 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,819.78 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address Audrea Traylor 7810 S. Walcott Chicago, IL 60620 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Avalon Vacuum & Janitorial Supply 3350 N. Ashland Ave. Chicago, IL 60657 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,983.79 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Avilis P.O. Box 283 Elk Grove Village, IL 60007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Banco Popular North America 9600 West Bryn Mawr Rosemont, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	United Building Maintenance, Inc. Name	Case number (if known) _____
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3.19	Nonpriority creditor's name and mailing address Barbara Bugaj 6523 W. Devon Chicago, IL 60631 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,259.78 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	Nonpriority creditor's name and mailing address Beatriz Figueroa 2334 W. 25th St. Chicago, IL 60608 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	Nonpriority creditor's name and mailing address BP Cardmember Service P.O. Box 15325 Wilmington, DE 19886-5325 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$868.11 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	Nonpriority creditor's name and mailing address Carl Lewis Jr. 1327 N. Harlem Ave. Oak Park, IL 60302 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,903.65 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address Carlos Altamirano 1925 Oakton Des Plaines, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,483.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address Catalina Castaneda 1437 Mitchell Lane Elk Grove Village, IL 60007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,256.15 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	Nonpriority creditor's name and mailing address Cesar Hernandez 7500 S. Elmhurst Rd. LOT 49 Des Plaines, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____

Name

3.26	Nonpriority creditor's name and mailing address Chico & Nunes P.C. 333 W. Wacker Drive Suite 1420 Chicago, IL 60606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$855.00
3.27	Nonpriority creditor's name and mailing address Cintas Corporation #22 P.O. Box 630921 Cincinnati, OH 45263-0921 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,345.20
3.28	Nonpriority creditor's name and mailing address Citizens for Antonio Munoz 3872 S Archer Avenue Chicago, IL 60632 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.29	Nonpriority creditor's name and mailing address Classic Party Rentals d/b/a M&M Event Rentals 9480 W. 55th St. McCook, IL 60525 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,283.44
3.30	Nonpriority creditor's name and mailing address Comcast P.O. Box 3001 Southeastern, PA 19398 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$234.85
3.31	Nonpriority creditor's name and mailing address Converge One NW 5806 P.O. BOX 1450 Minneapolis, MN 55485 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,295.00
3.32	Nonpriority creditor's name and mailing address Corporate Cleaning Services 21 West Elm Suite 9 Chicago, IL 60610 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,970.00

Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.33 Nonpriority creditor's name and mailing address **Courtland Pollock**
2435 W. Gladys #B
Chicago, IL 60612
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.34 Nonpriority creditor's name and mailing address **Craig Taylor**
7196 Cemetery Road
Breese, IL 62230
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$2,939.63**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: ATT Sub
Is the claim subject to offset? ☒ No ☐ Yes

3.35 Nonpriority creditor's name and mailing address **Cuberto Ceron**
1S158 Holyoke
Villa Park, IL 60180
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$2,002.80**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.36 Nonpriority creditor's name and mailing address **Danut Bredau**
8512 N. Clifton
Niles, IL 60714
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.37 Nonpriority creditor's name and mailing address **Direct TV**
P.O. Box 1300
West Chicago, IL 60186
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$989.50**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.38 Nonpriority creditor's name and mailing address **Domnica Bredau**
6822 W. Hobart
Chicago, IL 60631
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.39 Nonpriority creditor's name and mailing address **Drinker Biddle & Reath**
191 N. Wacker Dr., Ste 3700
Chicago, IL 60606
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$66,327.45**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	United Building Maintenance, Inc. Name	Case number (if known) _____
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3.40	Nonpriority creditor's name and mailing address DuPage County Collector P.O. Box 787 Wheaton, IL 60189 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,073.00
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3.41	Nonpriority creditor's name and mailing address Edmonds Incorporated 626 Executive Drive Willowbrook, IL 60527 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,092.66
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3.42	Nonpriority creditor's name and mailing address Eduardo Rodriguez 672 W. Pickwick Ct. Apt 9 GE Mt. Prospect, IL 60056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.43	Nonpriority creditor's name and mailing address eFax Corporate c/o j2 Global Communications, Inc. P.O. Box 51873 Los Angeles, CA 90051 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.09
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3.44	Nonpriority creditor's name and mailing address Elvia Ortega 4732 N. Monticello Chicago, IL 60625 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.45	Nonpriority creditor's name and mailing address Federal Express P.O. Box 94515 Palatine, IL 60094-4515 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153.01
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3.46	Nonpriority creditor's name and mailing address Felix Juarez 1714 W. Highland Chicago, IL 60660 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,956.35
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Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.47	Nonpriority creditor's name and mailing address Filemon Espinosa 4739 S. Loomis Chicago, IL 60609 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.48	Nonpriority creditor's name and mailing address Fort Dearborn Partners, Inc. 101 N. Wacker Drive Suite 1150 Chicago, IL 60606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,863.28
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3.49	Nonpriority creditor's name and mailing address Francisca Rocha 23 S. Elmwood Waukegan, IL 60085 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.50	Nonpriority creditor's name and mailing address Francisca Velazquez 6790 Pine Tree St. Hanover Park, IL 60122 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.51	Nonpriority creditor's name and mailing address GE/Wells Fargo Financial Leasing P.O. Box 105743 Atlanta, GA 30374 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Union Station Project</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.52	Nonpriority creditor's name and mailing address Georgeta Bredau 1727 Cardinal Ct. Wheeling, IL 60090 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.53	Nonpriority creditor's name and mailing address Georgeta Ursalas 6638 W. Windsor Ave. Berwyn, IL 60402 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.54 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Geovanni Dominguez
3749 S. Honore
Chicago, IL 60609
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.55 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$986.94**
GFC Leasing WI
P.O. Box 2290
Madison, WI 53701
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.56 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Gheorghe Bredau
6822 W. Hobart
Chicago, IL 60631
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.57 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$4,150.50**
Gloria Valdez
5405 W. 22nd Place
Cicero, IL 60804
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.58 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Gonzalo Franco
3397 S. Archer Ave.
Chicago, IL 60608
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.59 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$1,265.11**
Gordon Flesch
P.O. Box 992
Madison, WI 53701
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.60 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$21.58**
Grower Equipment & Supply
294 E. Belvidere Road
Hainesville, IL 60030
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Debtor **United Building Maintenance, Inc.**
Name

Case number (if known)

3.61	Nonpriority creditor's name and mailing address Guadalupe Martinez 1236 Solfisburg Ave. Aurora, IL 60505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.62	Nonpriority creditor's name and mailing address Hector Merchan 5220 W. Barry Chicago, IL 60641 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.63	Nonpriority creditor's name and mailing address High PSI Ltd. 75 N. Brandon Dr. Glendale Heights, IL 60139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$675.09
3.64	Nonpriority creditor's name and mailing address ICS Insurance Claim Solutions 615 S. Hough Street Barrington, IL 60010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.65	Nonpriority creditor's name and mailing address Irene Ramirez 2055 N. 18th St. Melrose Park, IL 60160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.66	Nonpriority creditor's name and mailing address ISN Software Corporation P.O. Box 841808 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,700.00
3.67	Nonpriority creditor's name and mailing address James M. Cabrera 11244 Chesapeake Westchester, IL 60154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.00

Debtor **United Building Maintenance, Inc.**
Name

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3.68	Nonpriority creditor's name and mailing address Janzimar, LLC c/o Michael Shacter, Esq. 440 Central Avenue Highland Park, IL 60035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$280,779.93
3.69	Nonpriority creditor's name and mailing address Jerry Drones 1356 N. Maplewood Chicago, IL 60622 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.70	Nonpriority creditor's name and mailing address John Hancock Life Insurance Customer Service Center P.O. Box 40 Buffalo, NY 14240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,700.00
3.71	Nonpriority creditor's name and mailing address Jose Frayre 600 Pickwick Ct. Apt. 1E Mt. Prospect, IL 60056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,870.25
3.72	Nonpriority creditor's name and mailing address Jose Gallegos 7500 S. Elmhurst Rd. LOT 59 Des Plaines, IL 60018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.73	Nonpriority creditor's name and mailing address Jose Morales 5130 S. Albany Chicago, IL 60632 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.74	Nonpriority creditor's name and mailing address Juan Gomez 333 W. Hawthorne Cir. Apt. 1 Mt. Prospect, IL 60056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,642.05

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Name

3.75	Nonpriority creditor's name and mailing address Karla Arratia 704 Huntington Commons Apt 2 Mt. Prospect, IL 60056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.76	Nonpriority creditor's name and mailing address Kubota Credit Corporation U.S.A. 4400 Amon Carter Blvd., Suite 100 Fort Worth, TX 76155 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.77	Nonpriority creditor's name and mailing address Laborers National Health Funds P.O. Box 94402 Chicago, IL 60690 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,055.12
3.78	Nonpriority creditor's name and mailing address LaDew Cleaning Concepts 5488 River View Rd. Riverton, IL 62561 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,293.24
3.79	Nonpriority creditor's name and mailing address Larry Cabrera 11120 Bristol Bend Orland Park, IL 60467 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$790.15
3.80	Nonpriority creditor's name and mailing address Larry J. Wolfe and Associates 6677 N. Lawler Skokie, IL 60077 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$790.00
3.81	Nonpriority creditor's name and mailing address Laura Aguilera 702 Huntington Comons Mt. Prospect, IL 60056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,935.75

Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.82	Nonpriority creditor's name and mailing address Liberty Mutual Insurance P.O. Box 2027 Keene, NH 03431 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$39,029.14 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.83	Nonpriority creditor's name and mailing address Local 25 SEIU 111 East Wacker Drive Chicago, IL 60601 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,239,348.07 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.84	Nonpriority creditor's name and mailing address Lorena Galindo 7500 N. Elmhurst Rd. Des Plaines, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.85	Nonpriority creditor's name and mailing address Lorena Galvan 331 W. Hawthorne Cir. Apt. 3 Mt. Prospect, IL 60056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,108.05 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.86	Nonpriority creditor's name and mailing address Loretta Brown 8917 S. Elizabeth Chicago, IL 60620 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,778.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.87	Nonpriority creditor's name and mailing address Luis Solis 1508 S. Central Cicero, IL 60804 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.88	Nonpriority creditor's name and mailing address Marcos Peralta 600 W. Pickwick Ct. Apt. 1E Mt. Prospect, IL 60056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,762.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.89 Nonpriority creditor's name and mailing address **Maria Chaidez**
1S158 Holyoke
Villa Park, IL 60181
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$2,763.45**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.90 Nonpriority creditor's name and mailing address **Maria Cordoba**
2149 W. Cullerton St.
Chicago, IL 60638
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.91 Nonpriority creditor's name and mailing address **Maria Cordoba**
1827 S. May St.
Chicago, IL 60608
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$3,470.00**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.92 Nonpriority creditor's name and mailing address **Maria Corona**
4153 Dubois Blvd
Brookfield, IL 60513
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.93 Nonpriority creditor's name and mailing address **Maritza Arevalo**
4947 N. Ridgeway
Chicago, IL 60625
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.94 Nonpriority creditor's name and mailing address **Martha Heranndez**
7500 N. Elmhurst Rd.
Des Plaines, IL 60018
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.95 Nonpriority creditor's name and mailing address **Martin Rufino**
1719 N. Keystone Ave.
Chicago, IL 60639
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	United Building Maintenance, Inc. Name	Case number (if known) _____
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3.96	Nonpriority creditor's name and mailing address Martin Villalobos 2055 N. 18th St. Melrose Park, IL 60160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.97	Nonpriority creditor's name and mailing address Michael Cabrera 3N227 Valewood Road West Chicago, CT 06018-5000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,115.38
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3.98	Nonpriority creditor's name and mailing address Mid-West Service System Mark W. Larson 1021 Hickory Street Geneseo, IL 61254 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,672.00
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3.99	Nonpriority creditor's name and mailing address Midwest Signature Bldg. Services 707 Osterman Avenue Unit 1345 Deerfield, IL 60015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,136.10
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3.100	Nonpriority creditor's name and mailing address Miguel Zuniga 5242 W. Deming Chicago, IL 60639 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,521.70
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3.101	Nonpriority creditor's name and mailing address Misael Juarez 4350 S. Trumbull Ave. Chicago, IL 60632 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,589.35
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3.102	Nonpriority creditor's name and mailing address Monica Murillo 1535 S. 58th Ave. Cicero, IL 60804 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.103	Nonpriority creditor's name and mailing address Nasiha Mujkanovic c/o Illinois Dept. of Labor 160 N. LaSalle St., Suite C-1300 Chicago, IL 60601 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,708.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.104	Nonpriority creditor's name and mailing address Nasiha Mujkanovic 4706 N. Olcott Ave. Harwood Heights, IL 60706 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.105	Nonpriority creditor's name and mailing address National Railroad Passenger Corp. c/ o Anderson, Rasor & Partners, LLP 100 S. Wacker Dr., Suite 100 Chicago, IL 60606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Personal Injury Lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.106	Nonpriority creditor's name and mailing address National Railroad Passenger Corp. c/ o Anderson, Rasor & Partners, LLP 100 S. Wacker Dr., Suite 100 Chicago, IL 60606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Counterclaim in Case No. 17-L-006018) (Janine Valentine v. Amtrak)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107	Nonpriority creditor's name and mailing address Nezir Sylva 5315 S. 72nd Ct. Summit, IL 60501 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,670.10 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108	Nonpriority creditor's name and mailing address Nora Rodriguez-Garcia 1228 Navy St. Elgin, IL 60123 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.109	Nonpriority creditor's name and mailing address Occupational Health Centers PO Box 488 Lombard, IL 60148 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$105.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.110 Nonpriority creditor's name and mailing address **P.F.C. Supply Co., Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$148.88**
PO Box 1085
Dundee, IL 60118
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.111 Nonpriority creditor's name and mailing address **Parking Industry Labor Management** As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
c/o John R. Bielski
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.112 Nonpriority creditor's name and mailing address **Parking Industry Labor Management** As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
c/o John R. Bielski, Esq.
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.113 Nonpriority creditor's name and mailing address **Paulino Diaz** As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
2220 Morningside Cir.
Carpentersville, IL 60110
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.114 Nonpriority creditor's name and mailing address **PDA Investigations LLC** As of the petition filing date, the claim is: *Check all that apply.* **\$457.50**
c/o Steven C. Rueckert
115 West 55th St., Suite 400
Clarendon Hills, IL 60514
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.115 Nonpriority creditor's name and mailing address **Pioneer Building Maintenance** As of the petition filing date, the claim is: *Check all that apply.* **\$13,191.46**
c/o Robert S. Lowder
2139 N. Grand Ave. East
Springfield, IL 62702
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.116 Nonpriority creditor's name and mailing address **Pitney Bowes Global Financial** As of the petition filing date, the claim is: *Check all that apply.* **\$446.72**
c/o CT Corporation System
208 S. LaSalle St., Suite 814
Chicago, IL 60604
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	United Building Maintenance, Inc. Name _____	Case number (if known) _____
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3.117	Nonpriority creditor's name and mailing address Pitney Bowes Purchase Power c/o Pitney Bowes Global Financial 500 Ross St., Suite 154-0470 Pittsburgh, PA 15262 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,050.13
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3.118	Nonpriority creditor's name and mailing address Popular Visa Card P.O. Box 31021 Tampa, FL 33630-3021 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,985.69
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3.119	Nonpriority creditor's name and mailing address Quench USA, Inc. 780 5th Avenue, Suite 200 King of Prussia, PA 19406 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159.80
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3.120	Nonpriority creditor's name and mailing address Ralph, Schwab & Schiever 175 E. Hawthorn Pkwy. Ste. 345 Vernon Hills, IL 60061 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,562.50
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3.121	Nonpriority creditor's name and mailing address Raul Romero 3410 Majestic Oaks Drive Saint Charles, IL 60174 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Payroll</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,401.04
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3.122	Nonpriority creditor's name and mailing address River City Cleaning Enterprises 2128 Williams St. #188 Cape Girardeau, MO 63703 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
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3.123	Nonpriority creditor's name and mailing address River City Cleaning Enterprises 2128 Williams #188 Cape Girardeau, MO 63703 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,626.63
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.124 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$0.00**
Rosetta Martin
c/o David J. Heyer, Esq.
212 W. Washington, Suite 2104
Chicago, IL 60606
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Personal Injury Lawsuit
Is the claim subject to offset? ☒ No ☐ Yes

3.125 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$882.25**
S & K Security
P.O. Box 789
Beecher, IL 60401
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.126 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$7,608.56**
Sage Software, Inc.
14855 Collection Center Dr.
Chicago, IL 60693
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.127 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Salomon Espinoza
5028 S. Marshfield
Chicago, IL 60609
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.128 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$6,345.15**
Shell Fleet Card
P.O. Box 183019
Columbus, OH 43218-3019
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.129 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$466.18**
Shred-it USA
PO Box 101007
Pasadena, CA 91189
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.130 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
Silvia Romero
517 W. Dempster
Mt. Prospect, IL 60056
☐ Contingent
☐ Unliquidated
☒ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	United Building Maintenance, Inc. Name	Case number (if known) _____
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3.131	Nonpriority creditor's name and mailing address Sonya Harris 1 Olympic Village Apt. 2A Chicago Heights, IL 60411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,539.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.132	Nonpriority creditor's name and mailing address SP Plus 200 East Randolph Street, Ste. 7700 Chicago, IL 60601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,860.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133	Nonpriority creditor's name and mailing address Splat Pest Control, Inc. 1012 Evergreen Dr. Carol Stream, IL 60188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134	Nonpriority creditor's name and mailing address Staples Business Advantage Dept. DETS P.O. Box 83689 Chicago, IL 60696-3689 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$422.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.135	Nonpriority creditor's name and mailing address Tammy Smith 921 S. Lawndale Chicago, IL 60624 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.136	Nonpriority creditor's name and mailing address Tatiana Bermudez Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.137	Nonpriority creditor's name and mailing address Teamsters Local Union 727 Health c/o John R. Bielski 1845 Walnut Street, 24th Floor Philadelphia, PA 19103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	United Building Maintenance, Inc. Name	Case number (if known) _____
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3.138	Nonpriority creditor's name and mailing address Teamsters Local Union 727 Legal c/o John R. Bielski 1845 Walnut Street, 24th Floor Philadelphia, PA 19103 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139	Nonpriority creditor's name and mailing address Teamsters Local Union 727 Pension c/o John R. Bielski 1845 Walnut Street, 24th Floor Philadelphia, PA 19103 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.140	Nonpriority creditor's name and mailing address Tek-Direct, Inc. PO Box 47778 Chicago, IL 60647 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209,263.17
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3.141	Nonpriority creditor's name and mailing address Tennant Sales and Service Co. P.O. Box 71414 Chicago, IL 60694 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,905.16
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3.142	Nonpriority creditor's name and mailing address Third Coast Underwriters PO Box 40790 Lansing, MI 48901 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,330.69
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3.143	Nonpriority creditor's name and mailing address Total Fire & Safety, Inc. 6808 Hobson Valley Drive Unit 105 Woodridge, IL 60517 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110.00
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3.144	Nonpriority creditor's name and mailing address Tyco Integrated Security LLC P.O. Box 371967 Pittsburgh, PA 15250 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$998.61
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Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.145	Nonpriority creditor's name and mailing address United Express System P.O. Box 1628 Aurora, IL 60507 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$297.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.146	Nonpriority creditor's name and mailing address Unlimited Services, Inc. PO Box 283 Elk Grove Village, IL 60007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,528.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.147	Nonpriority creditor's name and mailing address Victor Gallegos 1155 Willow Ln. Justice, IL 60458 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,349.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.148	Nonpriority creditor's name and mailing address Victorio Salazar 3257 S. Keeler Ave. Chicago, IL 60623 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,055.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wage Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.149	Nonpriority creditor's name and mailing address Waste Management P.O. Box 4648 Carol Stream, IL 60197-4648 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,031.57 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.150	Nonpriority creditor's name and mailing address Waxie Sanitary Supply P.O. Box 60227 Los Angeles, CA 90060 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$481,229.81 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.151	Nonpriority creditor's name and mailing address Weiss & Company LLP 2700 Patriot Boulevard Glenview, IL 60026 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$44,775.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **United Building Maintenance, Inc.** Case number (if known) _____
Name

3.152 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **Unknown**
Welbon Morris
3009 W. 173rd St.
Hazel Crest, IL 60429
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

3.153 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **Unknown**
Zurisdai Vargas-Gasca
1912 S. Leavitt St.
Chicago, IL 60608
Date(s) debt was incurred _____
Last 4 digits of account number _____
☐ Contingent
☐ Unliquidated
☒ Disputed
Basis for the claim: Wage Claim
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	William Martin Tasch Illinois Advocates, LLC 77 W. Washington St., #2120 Chicago, IL 60602	Line <u>3.112</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>0.00</u>
5b. +	\$ <u>3,156,412.25</u>
5c.	\$ <u>3,156,412.25</u>

**United States Bankruptcy Court
Northern District of Illinois**

In re **United Building Maintenance, Inc.**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: **164**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **July 12, 2018**

/s/ James Cabrera, Sr.

James Cabrera, Sr./President

Signer/Title

165 Easy Street LLC
165 Easy Street
Carol Stream, IL 60188

360 Facility LLC/Accruent Company
PO Box 123636
Dept. 3636
Dallas, TX 75312

A-1 Airport Limousine Service
114 East Lake Street
Bloomington, IL 60108

Acme WCS
14 Congress Circle West
Roselle, IL 60172

Adams Delaware Owner LLC
4960 Solution Center
Chicago, IL 60677

All in One Facility Services
c/o James Morgan, Esq.
200 South Michigan Ave., Suite 1100
Chicago, IL 60604

All in One Holdings LLC
c/o James Morgan, Esq.
200 South Michigan Ave., Suite 1100
Chicago, IL 60604

All in One Supply, LLC
425 W Broadway Street
Muskogee, OK 74401-6614

Ally
P.O. Box 380902
Minneapolis, MN 55428-0902

American Express
Box 0001
Los Angeles, CA 90096-8000

AmeriSource
1600 E. Grand Blvd.
Detroit, MI 48211

Amerisource Industrial Supply
c/o James Morgan, Esq.
200 South Michigan Ave., Suite 1100
Chicago, IL 60604

Amtrak National Railroad
c/o Anerson, Rasor & Partners, LLP
100 S. Wacker Dr., Suite 100
Chicago, IL 60606

Angelina Arroyo
4444 W. Altgeld St.
Chicago, IL 60639

Antonia Rivera
4206 Fern Ave.
Lyons, IL 60534

Aramark Uniform Services
4200 S. Halsted
Suite 603
Chicago, IL 60609

Aspen Valley Landscape/AmEx
13148 W 159th Street
Homer Glen, IL 60491

AT&T
P.O. Box 5093
Carol Stream, IL 60197

AT&T Mobility
PO Box 6416
Carol Stream, IL 60197-6416

Audrea Traylor
7810 S. Walcott
Chicago, IL 60620

Avalon Vacuum & Janitorial Supply
3350 N. Ashland Ave.
Chicago, IL 60657

Avilis
P.O. Box 283
Elk Grove Village, IL 60007

Banco Popular North America
9600 West Bryn Mawr Rosemont,
IL 60018

Barbara Bugaj
6523 W. Devon
Chicago, IL 60631

Beatriz Figueroa
2334 W. 25th St.
Chicago, IL 60608

BP
Cardmember Service
P.O. Box 15325
Wilmington, DE 19886-5325

Carl Lewis Jr.
1327 N. Harlem Ave.
Oak Park, IL 60302

Carlos Altamirano
1925 Oakton
Des Plaines, IL 60018

Catalina Castaneda
1437 Mitchell Lane
Elk Grove Village, IL 60007

CBRE, Inc., c/o Cathy Betourne
200 East Northwest Highway
Palatine, IL 60067

Cesar Hernandez
7500 S. Elmhurst Rd.
LOT 49
Des Plaines, IL 60018

Chico & Nunes P.C.
333 W. Wacker Drive
Suite 1420
Chicago, IL 60606

Cintas Corporation #22
P.O. Box 630921
Cincinnati, OH 45263-0921

Citizens for Antonio Munoz
3872 S Archer Avenue
Chicago, IL 60632

Classic Party Rentals
d/b/a M&M Event Rentals
9480 W. 55th St.
McCook, IL 60525

Comcast
P.O. Box 3001
Southeastern, PA 19398

Converge One
NW 5806
P.O. BOX 1450
Minneapolis, MN 55485

Corporate Cleaning Services
21 West Elm
Suite 9
Chicago, IL 60610

Courtland Pollock
2435 W. Gladys #B
Chicago, IL 60612

Craig Taylor
7196 Cemetery Road
Breese, IL 62230

Cuberto Ceron
1S158 Holyoke
Villa Park, IL 60180

Danut Bredau
8512 N. Clifton
Niles, IL 60714

Direct TV
P.O. Box 1300
West Chicago, IL 60186

Domnica Bredau
6822 W. Hobart
Chicago, IL 60631

Drinker Biddle & Reath
191 N. Wacker Dr., Ste 3700
Chicago, IL 60606

DuPage County Collector
P.O. Box 787
Wheaton, IL 60189

Edmonds Incorporated
626 Executive Drive
Willowbrook, IL 60527

Eduardo Rodriguez
672 W. Pickwick Ct.
Apt 9 GE
Mt. Prospect, IL 60056

eFax Corporate
c/o j2 Global Communications, Inc.
P.O. Box 51873
Los Angeles, CA 90051

Elvia Ortega
4732 N. Monticello
Chicago, IL 60625

Federal Express
P.O. Box 94515
Palatine, IL 60094-4515

Felix Juarez
1714 W. Highland
Chicago, IL 60660

Filemon Espinosa
4739 S. Loomis
Chicago, IL 60609

First Midwest Bank
c/o Jeffrey Elegant, Much Shelist
191 North Wacker Drive, Suite 1800
Chicago, IL 60606

Fort Dearborn Partners, Inc.
101 N. Wacker Drive
Suite 1150
Chicago, IL 60606

Francisca Rocha
23 S. Elmwood
Waukegan, IL 60085

Francisca Velazquez
6790 Pine Tree St.
Hanover Park, IL 60122

GE/Wells Fargo Financial Leasing
P.O. Box 105743
Atlanta, GA 30374

Georgeta Bredau
1727 Cardinal Ct.
Wheeling, IL 60090

Georgeta Ursalas
6638 W. Windsor Ave.
Berwyn, IL 60402

Geovanni Dominguez
3749 S. Honore
Chicago, IL 60609

GFC Leasing WI
P.O. Box 2290
Madison, WI 53701

George Bredau
6822 W. Hobart
Chicago, IL 60631

Gloria Valdez
5405 W. 22nd Place
Cicero, IL 60804

Gonzalo Franco
3397 S. Archer Ave.
Chicago, IL 60608

Gordon Flesch
P.O. Box 992
Madison, WI 53701

Grower Equipment & Supply
294 E. Belvidere Road
Hainesville, IL 60030

Guadalupe Martinez
1236 Solfisburg Ave.
Aurora, IL 60505

Hector Merchan
5220 W. Barry
Chicago, IL 60641

High PSI Ltd.
75 N. Brandon Dr.
Glendale Heights, IL 60139

ICS Insurance Claim Solutions
615 S. Hough Street
Barrington, IL 60010

Irene Ramirez
2055 N. 18th St.
Melrose Park, IL 60160

ISN Software Corporation
P.O. Box 841808
Dallas, TX 75284

J.C.'S Mid America Building Maint.
c/o Lawrence Edward Finn, Esq.
100 West Green Street
Bensenville, IL 60106

James M. Cabrera
11244 Chesapeake
Westchester, IL 60154

Janzimar, LLC
c/o Michael Shacter, Esq.
440 Central Avenue
Highland Park, IL 60035

Jerry Drones
1356 N. Maplewood
Chicago, IL 60622

John Hancock Life Insurance
Customer Service Center
P.O. Box 40
Buffalo, NY 14240

Jose Frayre
600 Pickwick Ct.
Apt. 1E
Mt. Prospect, IL 60056

Jose Gallegos
7500 S. Elmhurst Rd.
LOT 59
Des Plaines, IL 60018

Jose Morales
5130 S. Albany
Chicago, IL 60632

Juan Gomez
333 W. Hawthorne Cir.
Apt. 1
Mt. Prospect, IL 60056

Karla Arratia
704 Huntington Commons
Apt 2
Mt. Prospect, IL 60056

Kubota Credit Corporation U.S.A.
4400 Amon Carter Blvd., Suite 100
Fort Worth, TX 76155

Laborers National Health Funds
P.O. Box 94402
Chicago, IL 60690

LaDew Cleaning Concepts
5488 River View Rd.
Riverton, IL 62561

Larry Cabrera
11120 Bristol Bend
Orland Park, IL 60467

Larry J. Wolfe and Associates
6677 N. Lawler
Skokie, IL 60077

Laura Aguilera
702 Huntington Comons
Mt. Prospect, IL 60056

Liberty Mutual Insurance
P.O. Box 2027
Keene, NH 03431

Local 25 SEIU
111 East Wacker Drive
Chicago, IL 60601

Lorena Galindo
7500 N. Elmhurst Rd.
Des Plaines, IL 60018

Lorena Galvan
331 W. Hawthorne Cir.
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8917 S. Elizabeth
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Cicero, IL 60804

Marcos Peralta
600 W. Pickwick Ct.
Apt. 1E
Mt. Prospect, IL 60056

Maria Chaidez
1S158 Holyoke
Villa Park, IL 60181

Maria Cordoba
2149 W. Cullerton St.
Chicago, IL 60638

Maria Cordoba
1827 S. May St.
Chicago, IL 60608

Maria Corona
4153 Dubois Blvd
Brookfield, IL 60513

Maritza Arevalo
4947 N. Ridgeway
Chicago, IL 60625

Martha Hernandez
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Des Plaines, IL 60018

Martin Rufino
1719 N. Keystone Ave.
Chicago, IL 60639

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2055 N. 18th St.
Melrose Park, IL 60160

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3N227 Valewood Road
West Chicago, CT 06018-5000

Michael Cabrera
11244 Chesapeake
Westchester, IL 60154

Mid-West Service System
Mark W. Larson
1021 Hickory Street
Geneseo, IL 61254

Midwest Signature Bldg. Services
707 Osterman Avenue
Unit 1345
Deerfield, IL 60015

Miguel Zuniga
5242 W. Deming
Chicago, IL 60639

Misael Juarez
4350 S. Trumbull Ave.
Chicago, IL 60632

Monica Murillo
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Cicero, IL 60804

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160 N. LaSalle St., Suite C-1300
Chicago, IL 60601

Nasiha Mujkanovic
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Harwood Heights, IL 60706

National Railroad Passenger Corp.
c/o Anderson, Rasor & Partners, LLP
100 S. Wacker Dr., Suite 100
Chicago, IL 60606

Nezir Sylva
5315 S. 72nd Ct.
Summit, IL 60501

Nora Rodriguez-Garcia
1228 Navy St.
Elgin, IL 60123

Occupational Health Centers
PO Box 488
Lombard, IL 60148

One Source United Mechanical LLC
254 Tubeway Drive
Carol Stream, IL 60188

P.F.C. Supply Co., Inc.
PO Box 1085
Dundee, IL 60118

Parking Industry Labor Management
c/o John R. Bielski
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103

Parking Industry Labor Management
c/o John R. Bielski, Esq.
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103

Paulino Diaz
2220 Morningside Cir.
Carpentersville, IL 60110

PDA Investigations LLC
c/o Steven C. Rueckert
115 West 55th St., Suite 400
Clarendon Hills, IL 60514

Pioneer Building Maintenance
c/o Robert S. Lowder
2139 N. Grand Ave. East
Springfield, IL 62702

Pitney Bowes Global Financial
c/o CT Corporation System
208 S. LaSalle St., Suite 814
Chicago, IL 60604

Pitney Bowes Purchase Power
c/o Pitney Bowes Global Financial
500 Ross St., Suite 154-0470
Pittsburgh, PA 15262

Popular Visa Card
P.O. Box 31021
Tampa, FL 33630-3021

Quench USA, Inc.
780 5th Avenue, Suite 200
King of Prussia, PA 19406

Ralph, Schwab & Schiever
175 E. Hawthorn Pkwy. Ste. 345
Vernon Hills, IL 60061

Raul Romero
3410 Majestic Oaks Drive
Saint Charles, IL 60174

River City Cleaning Enterprises
2128 Williams St. #188
Cape Girardeau, MO 63703

River City Cleaning Enterprises
2128 Williams #188
Cape Girardeau, MO 63703

Rosetta Martin
c/o David J. Heyer, Esq.
212 W. Washington, Suite 2104
Chicago, IL 60606

S & K Security
P.O. Box 789
Beecher, IL 60401

Sage Software, Inc.
14855 Collection Center Dr.
Chicago, IL 60693

Salomon Espinoza
5028 S. Marshfield
Chicago, IL 60609

Shell Fleet Card
P.O. Box 183019
Columbus, OH 43218-3019

Shred-it USA
PO Box 101007
Pasadena, CA 91189

Silvia Romero
517 W. Dempster
Mt. Prospect, IL 60056

Sonya Harris
1 Olympic Village
Apt. 2A
Chicago Heights, IL 60411

SP Plus
200 East Randolph Street, Ste. 7700
Chicago, IL 60601

Splat Pest Control, Inc.
1012 Evergreen Dr.
Carol Stream, IL 60188

Staples Business Advantage
Dept. DET\$
P.O. Box 83689
Chicago, IL 60696-3689

Tammy Smith
921 S. Lawndale
Chicago, IL 60624

Tatiana Bermudez

Teamsters Local Union 727 Health
c/o John R. Bielski
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103

Teamsters Local Union 727 Legal
c/o John R. Bielski
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103

Teamsters Local Union 727 Pension
c/o John R. Bielski
1845 Walnut Street, 24th Floor
Philadelphia, PA 19103

Tek-Direct, Inc.
PO Box 47778
Chicago, IL 60647

Tennant Sales and Service Co.
P.O. Box 71414
Chicago, IL 60694

Third Coast Underwriters
PO Box 40790
Lansing, MI 48901

Total Fire & Safety, Inc.
6808 Hobson Valley Drive
Unit 105
Woodridge, IL 60517

Tyco Integrated Security LLC
P.O. Box 371967
Pittsburgh, PA 15250

United Express System
P.O. Box 1628
Aurora, IL 60507

Unlimited Services, Inc.
PO Box 283
Elk Grove Village, IL 60007

Victor Gallegos
1155 Willow Ln.
Justice, IL 60458

Victorio Salazar
3257 S. Keeler Ave.
Chicago, IL 60623

Waste Management
P.O. Box 4648
Carol Stream, IL 60197-4648

Waxie Sanitary Supply
P.O. Box 60227
Los Angeles, CA 90060

Weiss & Company LLP
2700 Patriot Boulevard
Glenview, IL 60026

Welbon Morris
3009 W. 173rd St.
Hazel Crest, IL 60429

William Martin Tasch
Illinois Advocates, LLC
77 W. Washington St., #2120
Chicago, IL 60602

Zurisadai Vargas-Gasca
1912 S. Leavitt St.
Chicago, IL 60608

**United States Bankruptcy Court
Northern District of Illinois**

In re **United Building Maintenance, Inc.**

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **United Building Maintenance, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

July 12, 2018

Date

/s/ Ariel Weissberg

Ariel Weissberg 03125591

Signature of Attorney or Litigant

Counsel for **United Building Maintenance, Inc.**

Weissberg and Associates, Ltd.

401 S. LaSalle St.

Suite 403

Chicago, IL 60605

312-663-0004 Fax:312-663-1514

ariel@weissberglaw.com